PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10623673

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
T = 2	TAL OLABAC	-	(Column 1)		(Column 2)		1	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			15					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			15 minus 20=		· 0			X\$ 9≖		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 =		2.			X42=		OR	X84=	168	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, er					"0" in c	olumn 2		TOTAL		OR	TOTAL	9/8	
	2 9 CLAIMS AS AMENDED - PART II									OTHER	THAN		
_ \	7 1105	(Column 1)		(Colur				SMALL ENTITY		OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDL- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 14	Minus	** 2	20	. (X\$ 9=	ree	OR⁄	X\$18=		
AME	Independent	* 5	Minus	*** [))	=		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=		
							1.	FOTAL ADDIT, FEE		OR.	TOTAL		
	(Column 1) (Column 2) (Column 3)										AUDIT. FEE		
		CLAIMS		HIGH	EST	Columnitor	1 6		ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X42=		OR	X84=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		J			0.1			
					•		L	+140=		OR	+280=		
							A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	4 th		=	lΓ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X42=			X84=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	,,,,,,		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE													
	The "Highest Num	ber Previously Pai	d For (Total or	Independe	ent) is the	highest number	er four	nd in the app	ropriate box	in cal	umn 1.		